

**Office of Risk Management
Building Data Change Form**

NOTE: This form pertains to building structures only; DO NOT USE for reporting movable property values.

Agency Requesting Change:

ORM Location Code:

Building (State) I. D. Number:

Authorized By:

Phone No.

Date:

SLABS Site Code (ORM use only):

TYPE OF CHANGE (Check One)

- ☐ Change Building Name (Building name changes can only be made by the State Agency which has ownership or is responsible for the building structure.)
- ☐ Modify Building
- ☐ Add Building Structure (see note below)
- ☐ Delete Building Structure (see note below)

	EXISTING DATA	NEW DATA
STATE AGENCY NAME		
ORM LOCATION CODE		
BUILDING NAME		
STREET ADDRESS (Not P. O. Box - must be physical address)		
CITY, STATE, ZIP		
OWNER OF BUILDING (If state owned indicate which State Agency)		
FLOOD ZONE: (Contact City or Parish Engineer if you need help in determining applicable flood zone)		
INDICATE REASON FOR CHANGE		

NOTE: WHEN ADDING/DELETING BUILDING STRUCTURES YOU MUST ATTACH A COPY OF PERTINENT DOCUMENTATION (TITLE TRANSFER, DEED, BILL OF SALE, ETC.) TO THIS FORM.

RETURN COMPLETED FORM TO: THE OFFICE OF RISK MANAGEMENT - UNDERWRITING SECTION, POST OFFICE BOX 94095, CAPITOL STATION, BATON ROUGE, LOUISIANA 70804-9095